For Office Use Only: RLIC #:	OPERATOR:	_ FEE:	DATE:	TYPE:

Rental License Application

1 – 4 Unit Rental Buildings
Please see instructions on back of form

Section 1	1 Rental Property Information				
Rental Property Address					
Number of Rental Units	Residential Units	Rooming Rental Units	Shared Bath Units	(description on back)	
List how is each unit addres	sed Unit# Unit#	Unit# Unit# (If a	a unit is occupied by Licensee plea	ase indicate that unit)	
Section 2	Ov	vner Information			
Name of OwnerFirs					
Firs Business Name (if applicable)	e)		Last		
(Submission of Articles of Organization listing the Owner is required at time of application)					
Address of Owner		a P.O. Box or commercial	mailing convice)		
	•				
City	County	State & Zip Code	Phone		
Date of Birth	E-mail				
I AFFIRM BY MY SIGNATURE BELOW THAT I AM IN COMPLIANCE WITH ALL RENTAL LICENSING STANDARDS OUTLINED IN MINNEAPOLIS CODE OF ORDINANCES, TITLE 12, CHAPTER 244. AND UNDERSTAND THAT FAILURE TO COMPLY WITH ANY OF THESE STANDARDS AND/OR CONDITIONS SHALL BE ADEQUATE GROUNDS FOR THE DENIAL, REFUSAL TO RENEW, REVOCATION, OR SUSPENSION OF MY RENTAL DWELLING LICENSE I ACKNOWLEDGE THAT ALL CORRESPONDENCE SENT FROM THE DEPARTMENT OF INSPECTIONS WILL BE MAILED TO THE					
APPOINTED AGENT/CONTAC		_	ENT OF INSPECTIONS WILL	. BE MAILED TO THE	
THE OWNER SHALL NOTIFY THE DEPARTMENT OF INSPECTIONS IN WRITING WITHIN 14 DAYS OF ANY CHANGES IN THE NAMES, ADDRESSES AND OTHER INFORMATION CONCERNING THE LAST LICENSE APPLICATION FILED WITH THE DEPARTMENT					
Signature of Owner		Date	· -		
Section 3 This person r		pointed Agent/Conta 6-county metropolitan area		BACK)	
Name of Appointed Agent/C			•		
Address of Agent/Contact P	First	MI	Last		
Address of Ageni/Contact P	(Address c	annot be a P.O. Box or con	nmercial mailing service)		
City	County	State & Zip Code	Phone		
Date of Birth	E-mail				
I AFFIRM BY MY SIGNATURE BELOW THAT I AM IN COMPLIANCE WITH ALL RENTAL LICENSING STANDARDS OUTLINED IN MINNEAPOLIS CODE OF ORDINANCES, TITLE 12, CHAPTER 244. AND UNDERSTAND THAT FAILURE TO COMPLY WITH ANY OF THESE STANDARDS AND/OR CONDITIONS SHALL BE ADEQUATE GROUNDS FOR THE DENIAL, REFUSAL TO RENEW, REVOCATION, OR SUSPENSION OF MY RENTAL DWELLING LICENSE					
I ACKNOWLEDGE THAT TO MANAGEMENT, AND ANY LE					
I AGREE THAT ALL CORRESPONDENCE SENT FROM THE DEPARTMENT OF INSPECTIONS WILL BE MAILED TO ME AS THE APPOINTED AGENT/CONTACT PERSON AS LISTED IN THIS SECTION					
Signature of Appointed Ager Subscribed and sworn to be	fore me on this				
Notary Public,	County		Space Reserve	ed for Notary Stamp	

Section 4	Rental Licensing Fees
Annual Fee: \$69 for first unit \$19 for each additional	Applications submitted during the months of July through March will be charged the annual fee of \$69 for the first unit and \$19 for each additional unit in the same building
Pro-Rated Fee: \$34.50 for first unit \$9.50 for each additional	Applications submitted the months of April, May or June will be charged the pro-rated fee of \$34.50 for the first unit and \$9.50 for each additional unit. Eligibility subject to occupancy date of April 1st or after
Administrative Fee: \$250.00	Properties occupied for more then 60 days without a license are subject to an administrative fee of \$250.00 for the first unit and \$20 for each additional unit (This is in addition to the annual fee)
Conversion Fee: \$1000.00 (one time inspection fee)	This inspection fee applies when a single family dwelling is being converted to a first time rental or has not held a valid license within 12 months. There is a reduction of \$250 if the owner or agent can present proof of attendance at a recognized fundamentals of rental property management course as stated in the Minneapolis Code of Ordinances, section 244.1870 (Fee must accompany the annual fee at time of application)
Change of Ownership Fee: \$450.00 (one time inspection fee)	This inspection fee applies when rental units within properties containing 4 or less units changes ownership (Fee must accompany the annual fee at time of application)

Rental Licensing fees are payable to: Minneapolis Finance Department Application submission to

Department of Regulatory Services Rental Licensing 250 South 4th Street, RM 300 Minneapolis, MN 55415

Instructions

Section 1

- Residential Rental Unit: A single residential unit which contains a sleeping area, a kitchen and bathroom facility
- Rooming Rental Unit: Any single rental unit legally approved by the City of Minneapolis, intended to be used for living and sleeping but does not contain a kitchen
- Shared Bath Rental Unit: A unit legally approved by the City of Minneapolis, that contains a kitchen but no bathroom

Section 2

Application will not be accepted if incomplete-all fields required

Section 3

- Application will not be accepted if incomplete-all fields required
- Signature Appointed agent/contact person must be notarized
- This person must reside within the 16-county metropolitan area of: Anoka, Carver, Chisago, Dakota, Goodhue, Hennepin, Isanti, Lesueur, Mcleod, Ramsey, Rice, Scott, Sherburne, Sibley, Washington Or Wright

Section 4

Questions regarding fee amounts or if fees apply please call 612-673-3000 or 311

IMPORTANT RENTAL PROPERTY INFORMATION

- A rental dwelling license is no longer valid if ownership has changed
- Rental Licenses are renewed annually, expiring August 31st of each year
- The owner of any dwelling selling a rental property must notify the buyer in writing of all unabated orders and administrative citations issued by the Department of Inspections pertaining to the property and notify the buyer of the rental licensing requirements as set out by Minneapolis Ordinances
- Licensing Standard 244.1910 Subsection (20) A licensee or owner/landlord shall not be in violation of section 244.265
 of this Code, which required owner/landlords to notify tenants and prospective tenants of pending mortgage
 foreclosure or cancellation of contract for deed involving the licensed property
- All Rental Licensing Standards are outlined in Minneapolis Code of Ordinances, Title 12, Chapter 244.

Spanish- Atención. Si desea recibir asistencia gratuita para traducir esta información, llama 612-673-2700

Somali- Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjamadda macluumaadkani oo lacag la' aan wac 612-673-3500

Hmong-Ceeb toom. Yog koj xav tau kev pab txhais cov xov no rau koj dawb, hu 612-673-2800

Sign Language Interpreter- 612-673-3220 TTY: 612-673-2626